

**Senate Bill No. 336**

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Passed the Senate August 27, 2012

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*Secretary of the Senate*

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Passed the Assembly August 23, 2012

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*Chief Clerk of the Assembly*

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This bill was received by the Governor this \_\_\_\_\_ day  
of \_\_\_\_\_, 2012, at \_\_\_\_\_ o'clock \_\_\_\_M.

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*Private Secretary of the Governor*

## CHAPTER \_\_\_\_\_

An act to add and repeal Section 1257.10 of the Health and Safety Code, relating to health facilities.

## LEGISLATIVE COUNSEL'S DIGEST

SB 336, Lieu. Emergency room crowding.

Existing law establishes various programs for the prevention of disease and the promotion of health to be administered by the State Department of Public Health, including, but not limited to, the licensure and regulation of health facilities, including general acute care hospitals. Violation of these provisions is a crime.

This bill would require every licensed general acute care hospital with an emergency department to determine the range of crowding scores, as defined, that constitute each category of the crowding scale, as provided, for its emergency department. The bill would require every licensed general acute care hospital with an emergency department to calculate and record a crowding score every 4 hours, except as specified, to assess the crowding condition of its emergency department. The bill would require, by January 1, 2014, every licensed general acute care hospital with an emergency department to develop and implement a full-capacity protocol for each of the categories of the crowding scale.

This bill would require every licensed general acute care hospital with an emergency department to file its full-capacity protocol with the Office of Statewide Health Planning and Development, and to annually report revisions to its protocol. The bill would repeal its provisions on January 1, 2017. By changing the definition of an existing crime, this bill would impose a state-mandated local program.

The California Constitution requires the state to reimburse local agencies and school districts for certain costs mandated by the state. Statutory provisions establish procedures for making that reimbursement.

This bill would provide that no reimbursement is required by this act for a specified reason.

*The people of the State of California do enact as follows:*

SECTION 1. Section 1257.10 is added to the Health and Safety Code, to read:

1257.10. (a) For purposes of this section, “crowding score” means the score calculated using the following equation:  $85.8 \text{ (total number of patients within the emergency department / total number of staffed beds in the emergency department, not to exceed the number of licensed beds)} + 600 \text{ (total number of admissions waiting in the emergency department, including patients awaiting transfer / total number of acute inpatient hospital beds routinely in use by the hospital, excluding beds in the newborn nursery, neonatal intensive care unit, and obstetrics)} + 13.4 \text{ (total number of patients in the emergency department admitted to the intensive care-critical care unit, with a maximum of four)} + 0.93 \text{ (the longest admit time, in hours, including transfers)} + 5.64 \text{ (the wait time for the last patient waiting the longest in the waiting room, in hours)} - 20$ .

(b) For purposes of this section, “crowding scale” means a range of crowding scores that are divided into six categories of which level one is the lowest level of crowding and level six is the highest.

(c) Every licensed general acute care hospital, as defined in subdivision (a) of Section 1250, with an emergency department shall determine the range of crowding scores that constitute each category of the crowding scale for its emergency department.

(d) (1) Except as otherwise provided in this subdivision, every licensed general acute care hospital with an emergency department shall calculate and record a crowding score a minimum of every four hours to assess the crowding condition of its emergency department.

(2) If, after calculating and recording a crowding score as set forth in paragraph (1), a licensed general acute care hospital does not have a crowding score in level four or higher for the previous 30 days, it shall, notwithstanding paragraph (1), thereafter calculate and record a crowding score every eight hours rather than every four hours.

(3) If the licensed general acute care hospital that is calculating and recording a crowding score every eight hours pursuant to paragraph (2) records a score in level four or higher, it shall

immediately resume calculating and recording a crowding score at least once every four hours as set forth in paragraph (1).

(4) Notwithstanding paragraphs (1) and (2), a licensed general acute care hospital that has an emergency department census of less than 14,000 visits annually shall calculate and record the crowding score once daily between 4 p.m. and 8 p.m.

(e) Every licensed general acute care hospital with an emergency department shall, by January 1, 2014, develop and implement, in consultation with its emergency department staff, a full-capacity protocol for each of the categories of the crowding scale that addresses all of the following factors, as applicable:

(1) Notification of hospital administrators, nursing staff, medical staff, and ancillary services of category changes on the crowding scale.

(2) Hospital operations, including bed utilization, transfers, elective admissions, discharges, supplies, and additional staffing.

(3) Emergency department operations, including diversion, triage, and alternative care sites.

(4) The planned response of the organized medical staff for rounds, discharges, coordination with the emergency department, and emergency consults for emergency department patients.

(f) Every licensed general acute care hospital with an emergency department shall file its full-capacity protocol with the Office of Statewide Health Planning and Development and shall annually report to the office any revisions to its protocol.

(g) This section shall remain in effect only until January 1, 2017, and as of that date is repealed, unless a later enacted statute, that is enacted before January 1, 2017, deletes or extends that date.

SEC. 2. No reimbursement is required by this act pursuant to Section 6 of Article XIII B of the California Constitution because the only costs that may be incurred by a local agency or school district will be incurred because this act creates a new crime or infraction, eliminates a crime or infraction, or changes the penalty for a crime or infraction, within the meaning of Section 17556 of the Government Code, or changes the definition of a crime within the meaning of Section 6 of Article XIII B of the California Constitution.







Approved \_\_\_\_\_, 2012

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*Governor*